#### Case 16-81422 Doc 1 Filed 06/10/16 Entered 06/10/16 14:08:33 Desc Main Document Page 1 of 57

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued	Jeffery First name	Sylvie First name
	picture identification (for	Filst fidile	
	example, your driver's license or passport).	J. Middle name	S. Middle name
	Bring your picture		Heller
	identification to your meetin with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4072	xxx-xx-6537

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	otor 1 hotor 2 Heller, Jeffery J. 8	& Heller, Sylvie S.	Case number (if known)			
<b>4</b> .	Any business names and	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names  Business name(s)		Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		Oregon, IL 61061-2019  Number, Street, City, State & ZIP Code  Ogle  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any	Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Debtor 2 Heller, Jeffery J. 8	Heller, Sylvie S.		_ c	ase number (if known)				
Part 2: Tell the Court About Y	our Bankruptcy Cas	e						
7. The chapter of the Bankruptcy Code you are		ief description of each, see Not e top of page 1 and check the a		I.S.C. § 342(b) for Individuals	Filing for Bankruptcy (Form			
choosing to file under	☐ Chapter 7	☐ Chapter 7						
	☐ Chapter 11							
	☐ Chapter 12							
	■ Chapter 13							
8. How you will pay the fee	about how you If your attorney pre-printed add I need to pay	pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The						
	Filing Fee in In	nstallments (Official Form 103A t my fee be waived (You may r	).	The state of the s	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
	not required to your family size	o, waive your fee, and may do so e and you are unable to pay the hapter 7 Filing Fee Waived (Off	only if your income in fee in installments).	is less than 150% of the offici If you choose this option, you	ial poverty line that applies to			
9. Have you filed for	□ No.							
bankruptcy within the last 8 years?	Yes.							
	(A <del></del>	Northern District of						
	District	Illinois	When 11/11/08	Case number	08-73642			
	District	-	When	Case number				
	District		When	Case number				
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing	14000000000000000000000000000000000000							
this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
	Debtor			Relationship to y	ou			
	District	3 <u></u>	When	Case number, if I	known			
	Debtor			Relationship to y	ou			
	District		When	Case number, if I	known			
11. Do you rent your	□ No. Go to li	ne 12.						
residencer	■ Yes. Has you	ur landlord obtained an eviction	judgment against you	u and do you want to stay in y	our residence?			
	=	No. Go to line 12.						
		Yes. Fill out <i>Initial Statement A</i> bankruptcy petition.	bout an Eviction Jud	gment Against You (Form 10	01A) and file it with this			
11. Do you rent your residence?	Yes. Has you	ur landlord obtained an eviction  No. Go to line 12.  Yes. Fill out <i>Initial Statement A</i>						

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	tor 1 tor 2 Heller, Jeffery J. 8	Heller,	Sylvie S		Case number (if known)		
Pari	Report About Any Bus	sinesses Y	'ou Own a	as a Sole Proprieto	г		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	☐ Yes. Name and location of business  Name of business, if any				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.						
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, Stat	e & ZIP Code		
	to this petition.		Check	the appropriate box	to describe your business:		
☐ Health Care Business (as defined in 11 U.S.C. § 101(27				ess (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation:	. If you inc	licate that you are a	ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure in 11		
	For a definition of small	■ No.	I am n	ot filing under Chap	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Code.				
20000000		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	Report if You Own or	Have Any	Hazardo	ıs Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is t	he hazard?			
	safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code		

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)oh	or 1			Document Page 5 c	)i 5 <i>i</i>	
	Heller, Jeffery J. 8	He	ller, Sylv	ie S.		Case number (if known)
art	5: Explain Your Efforts to	o Red	ceive a Br	iefing About Credit Counseling		
receive a briefing about credit counseling before y file for bankruptcy. You must truthfully check one the following choices. If y cannot do so, you are not eligible to file.  If you file anyway, the coucan dismiss your case, you	you have received a briefing about credit counseling.  The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You		filed this certificat Attach a if any, tha			ut Debtor 2 (Spouse Only in a Joint Case):  must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  I received a briefing from an approved credit
	the following choices. If you cannot do so, you are not eligible to file.  If you file anyway, the court can dismiss your case, you will lose whatever filing fee		counseli filed this certificat Within 14	ing agency within the 180 days before I bankruptcy petition, but I do not have a te of completion.  I days after you file this bankruptcy petition, T file a copy of the certificate and payment		counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.  Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
	can begin collection		services unable to days afte circums	that I asked for credit counseling from an approved agency, but was o obtain those services during the 7 er I made my request, and exigent tances merit a 30-day temporary waiver quirement.		I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			requirement of the country of the co			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.  If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			for cause I am not credit co	nsion of the 30-day deadline is granted only and is limited to a maximum of 15 days.  required to receive a briefing about punseling because of:  capacity.  lave a mental illness or a mental deficiency at makes me incapable of realizing or making tional decisions about finances.  sability.  y physical disability causes me to be unable participate in a briefing in person, by phone, through the internet, even after I reasonably ed to do so.  ctive duty.  In currently on active military duty in a litary combat zone.  lieve you are not required to receive a briefing edit counseling, you must file a motion for edit counseling with the court.		I am not required to receive a briefing about credit counseling because of:  Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  Active duty. I am currently on active military duty in a military combat zone.  If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Debtor 2 Heller, Jeffery J. & Heller, Sylvie S.			Sylvie S.	Case number	Case number (if known)				
Pari	Answer These Question	ons for Re	porting Purposes						
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily bus for a business or investment or	iness debts? Business debts are debts the through the operation of the business or inv	at you incurred to obtain money vestment.				
			□ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe	that are not consumer debts or business d	ebts				
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7	. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.		I am filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	administrative expenses		□ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99		□ 1,000-5,000 □ 5001-10,000	□ 25,001-50,000 □ 50,001-100,000				
		□ 100-1 □ 200-9	3명	□ 10,001-25,000	☐ More than100,000				
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion				
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
20.	How much do you estimate your liabilities to	□ \$0 - \$		□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion				
	be?		01 - \$100,000 001 - \$500,000	□ \$50,000,001 - \$30 million	□ \$10,000,000,001 - \$10 billion				
			001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
Par	Sign Below	5000		and the second s	7.3737				
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
		If I have States Co	chosen to file under Chapter 7, I ode. I understand the relief availa	am aware that I may proceed, if eligible, ble under each chapter, and I choose to pro	under Chapter 7, 11,12, or 13 of title 11, United oceed under Chapter 7.				
		If no attor	ney represents me and I did not ained and read the notice required	pay or agree to pay someone who is not an d by 11 U.S.C. § 342(b).	attorney to help me fill out this document, I				
			I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		case can	result in fines up to \$250,000, or	oncealing property, or obtaining money or pr r imprisonment for up to 20 years, or both	operty by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
			G. Heller e of Debtor 1	Sylvie S. Heller Signature of Debtor	2				
		Executed	on 04/08/20/6 MM/DD/YYYY	Executed on <i>Old</i>	108/3016				

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Debtor 1 Debtor 2 Heller, Jeffery J.	& Heller, Sylvie S.	Case	Case number (if known)			
For your attorney, if you are represented by one if you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.  Date  Date  MM / DD / YYYY					
	Brian Wright Printed name Brian Wright & Associates, P.C. Firm name					
	437 West State Street Suite 101 Sycamore, IL 60178 Number, Street, City, State & ZIP Code					
	Contact phone (815) 895-2074  6304330  Bar number & State	Email address	bw@wrightandassociateslaw.com			

Ca	ase 16-81422	Doc 1	Filed 06/10/16	Entered 06/10/16 14:08	3:33 C	esc Main	
			Document	Page 8 of 57	_		
Fill in this inform	mation to identify yo	ur case:					
Debtor 1	Jeffery J. Helle				]		
	First Name		ddle Name	Last Name	}		
Debtor 2	Sylvie S. Helle		ddle Name	Last Name			
(Spouse if, filing)	riisi Name	IVII	adie Name	Last Name			
United States Ba	inkruptcy Court for the	e: NORTI	HERN DISTRICT OF ILLI	NOIS, WESTERN DIVISION			
Case number							
(if known)						Check if this is an	
						amended filing	
Official Fo	rm 106Sum						
Summary of	of Your Asset	s and Li	abilities and Ce	rtain Statistical Informa	ation	12/15	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.							
Part 1: Summ	Part 1: Summarize Your Assets						
						Your assets	
						Value of what you own	
1 Schedule /	VR: Property (Official	Form 1064/	R)				

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Debtor 1 Debtor 2 Heller, Jeffery J. & Heller, Sylvie S.

Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_9,368.70

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Fill in this infor	mation to identify your cas	se and this filing:		
Debtor 1	Jeffery J. Heller			
Debtor 2	First Name	Middle Name Last Name		
(Spouse, if filing)	Sylvie S. Heller First Name	Middle Name Last Name		
United States Ba	ankruptcy Court for the: N	ORTHERN DISTRICT OF ILLINOIS, WESTERI	N DIVISION	
Case number _				☐ Check if this is an amended filing
				ag
Official Fo	orm 106A/B			
_	_	<b>44</b> . <i>a</i>		
	le A/B: Prope			12/15
hink it fits best. E	Be as complete and accurate a	ems. List an asset only once. If an asset fits in mo is possible. If two married people are filing togethe	er, both are equally responsible for sup	plying correct
nformation. If mor Answer every que		eparate sheet to this form. On the top of any additi	onal pages, write your name and case	number (if known).
Part 1: Describe	a Fach Posidence Building I	and, or Other Real Estate You Own or Have an Inte	raet In	
	<u> </u>			
1. Do you own or	have any legal or equitable in	terest in any residence, building, land, or similar pr	roperty?	
No. Go to Pa	urt 2.			
☐ Yes. Where	is the property?			
Part 2: Describe	e Your Vehicles			
30001113				
□ No ■ Yes	rucks, tractors, sport utility	vehicles, motorcycles		
3.1 Make:	Dodge	Who has an interest in the property? Check	one Do not deduct secured cla	
-	Charger	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
Year:	2013 ste mileage: 4340	Debtor 2 only	Current value of the	Current value of the
Other infor		Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another	entire property?	portion you own?
			*** *** ***	• • • • • • • • • • • • • • • • • • • •
		Check if this is community property (see instructions)	\$18,000.00	\$18,000.00
3.2 Make:	Subaru	Who has an interest in the property? Check	one Do not deduct secured cla	•
Model:	Legacy	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
Year:	2014	☐ Debtor 2 only	Current value of the	Current value of the
• •	ite mileage: 5540		entire property?	portion you own?
Other infor	mation:	At least one of the debtors and another		
		Check if this is community property (see instructions)	\$20,200.00	\$20,200.00
		and other recreational vehicles, other vehicles		
Examples: Boa	ats, trailers, motors, personal	watercraft, fishing vessels, snowmobiles, motorc	ycle accessories	
■ No				

☐ Yes

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■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

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Debtor 1 Debtor 2

Heller, Jeffery J. & Heller, Sylvie S.

Case number (if known)

		Retirement Account	State Employee Re	etirement System	\$10,500.00
22	Examples: Agreemer	sed deposits you have made so that y		use from a company er), telecommunications companies, or	r others
	■ No □ Yes		Institution name or indi	vidual:	
23	. Annuities (A contract	t for a periodic payment of money to y	ou, either for life or for a nu	mber of years)	
	Yes	Issuer name and description.			
24	. Interests in an educa 26 U.S.C. §§ 530(b)(1	ntion IRA, in an account in a qualifi ), 529A(b), and 529(b)(1).	ied ABLE program, or un	der a qualified state tuition prograr	n.
	☐ Yes	Institution name and description. Se	parately file the records of a	any interests.11 U.S.C. § 521(c):	
25	. Trusts, equitable or ■ No	future interests in property (other	than anything listed in li	ne 1), and rights or powers exercis	able for your benefit
	☐ Yes. Give specific	information about them			
26	Examples: Internet d  No	trademarks, trade secrets, and ot omain names, websites, proceeds from		greements	
	☐ Yes. Give specific	information about them			
27	Examples: Building p	s, and other general intangibles bermits, exclusive licenses, cooperation information about them	ve association holdings, liqu	or licenses, professional licenses	
	·				Command value of the
IVI	oney or property owe	a to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
28	. Tax refunds owed to	you			
	■ No □ Yes. Give specific i	nformation about them, including whe	ether you already filed the re	eturns and the tax years	
29	. Family support  Examples: Past due  ■ No	or lump sum alimony, spousal suppo	ort, child support, maintena	ance, divorce settlement, property se	ttlement
	☐ Yes. Give specific i	nformation			
30	, ·		disability benefits, sick pay,	vacation pay, workers' compensation	n, Social Security benefits;
	■ No □ Yes. Give specific	information			
31		ce policies sability, or life insurance; health savin	gs account (HSA); credit, h	nomeowner's, or renter's insurance	
	☐ No  Yes. Name the insu	rance company of each policy and lis	t its value.		
		Company name:		Beneficiary:	Surrender or refund value:
		The Hartford		Spouse and minor child	\$1.00

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	Debtor 1 Debtor 2 Heller, Jeffery J. & Heller, Sylvie S.		Case number (if known)	
	<ol> <li>Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insura died.</li> <li>No</li> </ol>	ance policy, or are	currently entitled to receive	property because someone has
_	■ No □ Yes. Give specific information			
_	3. Claims against third parties, whether or not you have filed a lawsuit of Examples: Accidents, employment disputes, insurance claims, or rights to the second se		d for payment	
	■ No □ Yes. Describe each claim			
	Other contingent and unliquidated claims of every nature, including      ■ No	counterclaims of	the debtor and rights to s	et off claims
	Yes. Describe each claim			
_	5. Any financial assets you did not already list ■ No			
	☐ Yes. Give specific information			
36.	36. Add the dollar value of all of your entries from Part 4, including any Part 4. Write that number here			\$14,221.00
Part	Part 5: Describe Any Business-Related Property You Own or Have an Interest In	. List any real esta	te in Part 1.	
	7. Do you own or have any legal or equitable interest in any business-related pro  No. Go to Part 6.  Yes. Go to line 38.	pperty?		
Part	Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own If you own or have an interest in farmland, list it in Part 1.	or Have an Interes	t In.	
46.	6. Do you own or have any legal or equitable interest in any farm- or co	mmercial fishing	-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	Part 7: Describe All Property You Own or Have an Interest in That You Did	Not List Above		
	<ol> <li>Do you have other property of any kind you did not already list?         Examples: Season tickets, country club membership         ■ No     </li> </ol>			
	☐ Yes. Give specific information			
54.	54. Add the dollar value of all of your entries from Part 7. Write that nu	mber here		\$0.00
Part	Part 8: List the Totals of Each Part of this Form			
55.	55. Part 1: Total real estate, line 2			\$0.00
56.	·	\$38,200.00		
57.	·	\$4,250.00		
58.	· —	\$14,221.00		
59.	• • • • • • • • • • • • • • • • • • • •	\$0.00		
60.		\$0.00		
61.	61. Part 7: Total other property not listed, line 54 +	\$0.00		
62.		\$56,671.00	Copy personal property to	stal \$56,671.00
63.	63. <b>Total of all property on Schedule A/B</b> . Add line 55 + line 62			\$56,671.00

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Debtor 1 Debtor 2 Heller, Jeffery J. & Heller, Sylvie S.

Case number (if known)

Official Form 106A/B Schedule A/B: Property page 6

	Cas	Se 10-81422 L	Docume		Page 16 of 57	5.33 L	esc Main
Fill	in this inform	ation to identify your					
Del	btor 1	Jeffery J. Heller					
Dal	htor O	First Name	Middle Name	L	ast Name	}	
	btor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	1	
Uni	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT	T OF ILLING	OIS, WESTERN DIVISION		
	se number						Check if this is an amended filing
Of	ficial For	m 106C					
Sc	chedule	e C: The Pro	operty You (	Claim	as Exempt		4/16
orop out a	erty you listed o	on Schedule A/B: Prope	erty (Official Form 106A/B)	as your sou	r, both are equally responsible for sulurce, list the property that you claim a lry. On the top of any additional page	is exempt. If	more space is needed, fill
spe app func to a	cific dollar am licable statuto ds—may be ur	ount as exempt. Alterr ry limit. Some exempt Ilimited in dollar amou lar amount and the val	natively, you may claim t ions—such as those for ınt. However, if you clain	the full fair health aids n an exemp	unt of the exemption you claim. O market value of the property being s, rights to receive certain benefit otion of 100% of fair market value to exceed that amount, your exem	ng exempte s, and tax-e under a lav	d up to the amount of any exempt retirement v that limits the exemption
Pai	rt 1: Identify	the Property You Cla	im as Exempt				
1.	Which set of	exemptions are you cl	aiming? Check one only,	even if you	r spouse is filing with you.		
	■ You are clai	iming state and federal n	nonbankruptcy exemptions.	. 11 U.S.C	. § 522(b)(3)		
	☐ You are clai	ming federal exemptions	s. 11 U.S.C. § 522(b)(2)				
2.	For any prope	erty you list on Schedo	ule A/B that you claim as	s exempt, f	ill in the information below.		
		on of the property and line	e on Current value of portion you own		ount of the exemption you claim	Specific la	aws that allow exemption
	Scriedule A/B (	nat lists this property	Copy the value from Schedule A/B		eck only one box for each exemption.		
De	ebtor 1 Exem Dodge	<u>ptions</u>	\$18,000.	00 =	\$2,400.00	735 ILC	S 5/12-1001(c)
	Charger 2013 43400 Line from School	edule A/B: <b>3.1</b>	Ψ10,000.		100% of fair market value, up to any applicable statutory limit		
	Subaru		\$20,200.	.00	\$2,400.00	735 ILC	S 5/12-1001(c)
	Legacy 2014				100% of fair market value, up to		
	55400 Line from Sche	edule A/B. <b>3.2</b>			any applicable statutory limit		
	Normal com	nplement of househ	nold \$2,500.	.00	\$2,500.00	735 ILC	S 5/12-1001(b)
	Line from Sche	edule A/B. <b>6.1</b>			100% of fair market value, up to any applicable statutory limit		

TV's and Laptop

Line from Schedule A/B. 7.1

\$400.00

735 ILCS 5/12-1001(b)

\$400.00

100% of fair market value, up to any applicable statutory limit

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Bikes, treadmill, golf club sets Line from Schedule A/B. 9.1	\$600.00		\$600.00	735 ILCS 5/12-1001(b)
Zine nom osinodale 702. GTT			100% of fair market value, up to any applicable statutory limit	
Mens and womens clothing Line from Schedule A/B 11.1	\$500.00	•	\$500.00	735 ILCS 5/12-1001(a)
			100% of fair market value, up to any applicable statutory limit	
Wedding rings Line from Schedule A/B: 12.1	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Cash in wallet Line from Schedule A/B. 16.1	\$120.00		\$120.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
The Harvard State Bank Line from Schedule A/B 17.1	\$180.00	•	\$180.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
The Harvard State Bank Line from Schedule A/B: 17.2	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
The Harvard State Bank Line from Schedule A/B 17.3	\$660.00		\$660.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
The Harvard State Bank Line from Schedule A/B 17.4	\$40.00		\$40.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Fidelity Investments Line from Schedule A/B 21.1	\$2,620.00			735 ILCS 5/12-1006
Line Holl Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
State Employee Retirement System Line from Schedule A/B: 21.2	\$10,500.00			735 ILCS 5/12-1006
			100% of fair market value, up to any applicable statutory limit	
The Hartford Line from Schedule A/B: 31.1	\$1.00			735 ILCS 5/12-1001(f)
LING HOLL GULLERAL GILI			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3  ■ No  □ Yes. Did you acquire the property covere	years after that for case	s filed		

Official Form 106C

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.		

☐ Yes

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					9		
Fill	in this inforn	nation to identify your case	e:				
Deb	otor 1						
		First Name	Middle Name	L	ast Name	)	
	otor 2	Sylvie S. Heller First Name	Middle Name		ant Nama		
(Spo	use if, filing)	First Name	Middle Name	L	ast Name		
Unit	ted States Ba	nkruptcy Court for the: N	ORTHERN DISTRICT OF	ILLING	DIS, WESTERN DIVISION		
Cas	e number						
(if kn	own)						☐ Check if this is an
						_	amended filing
Off	ficial Fo	rm 106C					
			- mt \/ Ol -	!	<u></u>		
<u>SC</u>	neaui	e C: The Prop	erty You Cia	ıım	as Exempt		4/16
prope	erty you listed and attach to the	on Schedule A/B: Property (	Official Form 106A/B) as yo	ur sou	, both are equally responsible for sup rce, list the property that you claim as ry. On the top of any additional pages	exempt.	If more space is needed, fill
to a appl	particular do icable statute	llar amount and the value of	of the property is determine		otion of 100% of fair market value of exceed that amount, your exemp		
1.	Which set of	exemptions are you claim	ng? Check one only, even	if you	r spouse is filing with you.		
	You are cla	aiming state and federal nonb	ankruptcy exemptions. 11	U.S.C	. § 522(b)(3)		
	☐ You are cla	aiming federal exemptions. 1	1 U.S.C. § 522(b)(2)				
2.	For any prop	perty you list on Schedule A	A/B that you claim as exer	mpt, fi	II in the information below.		
		on of the property and line on that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific	laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
Del	btor 2 Exen	nptions					
	Brief descripti						
	Line from Sch	nedule A/B.			100% of fair market value, up to any applicable statutory limit		
	(Subject to ad ■ No □ Yes. Did □ N	you acquire the property cov	y 3 years after that for case	es filed	on or after the date of adjustment.) 5 days before you filed this case?		
	П У	20					

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		Document Pa	ade 20 ot	5/		
Fill in this infor	mation to identify you	r case:				
Debtor 1	Jeffery J. Heller	•				
	First Name		st Name		}	
Debtor 2 (Spouse if, filing)	Sylvie S. Heller First Name	Middle Name Las	st Name			
(Spouse II, IIIIIg)	i iist ivailie	wildle warre Las	st ivallie			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINO	IS, WESTERN	IDIVISION		
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Forr	m 106D					
		Miles IIIs a Oleder Co		D		
Schedule	D: Creditors	Who Have Claims Se	curea b	y Propert	<u>y</u>	12/15
		f two married people are filing together, bo , number the entries, and attach it to this fo				
1. Do any creditors	s have claims secured by	your property?				
☐ No. Chec	k this box and submit thi	is form to the court with your other schedu	ules. You have	nothing else to re	port on this form.	
Yes. Fill ir	n all of the information be	elow.				
Part 1: List A	All Secured Claims					
2. List all secured	I claims. If a creditor has n	nore than one secured claim, list the creditor s	separately C	Column A	Column B	Column C
		a particular claim, list the other creditors in Pacal order according to the creditor 's name.	D	mount of claim o not deduct the alue of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 US Bank	·	Describe the property that secures the cl	aim:	\$22,710.00	\$20,200.00	\$2,510.00
Creditor's Nam	ne	2014 Subaru Legacy				
Attn: Bar						
PO Box 5	-	As of the date you file, the claim is: Check	all that			
45201-52	•	apply.  Contingent				
Number, Stree	et, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortg	age or secured			
Debtor 2 only		car loan)	ala lian)			
■ Debtor 1 and D	•	☐ Statutory lien (such as tax lien, mechanic	c's lien)			
☐ At least one of	the debtors and another	☐ Judgment lien from a lawsuit	rchase Mon	ov Socurity		
community de		Other (including a right to offset)	TCHASE WIOTI	ey Security		
Date debt was inc	ourred <u>08/01/2013</u>	Last 4 digits of account number	5710			
Wells Fai	rgo Dealer	Describe the property that secures the cl	aim:	\$30,394.00	\$18,000.00	\$12,394.00
Creditor's Nam		2013 Dodge Charger		***************************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
PO Box 3		As of the date you file, the claim is: Check	all that			
Rancho ( 91729-35	Cucamonga, CA	apply.				
	et, City, State & Zip Code	☐ Contingent☐ Unliquidated				
Number, Street	et, Oity, State & Zip Code	☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mortg	age or secured			
Debtor 2 only		car loan)				
Debtor 1 and D	•	Statutory lien (such as tax lien, mechanic	c's lien)			
_	the debtors and another	Judgment lien from a lawsuit				
Check if this c		Other (including a right to offset)	rchase Mon	ey Security		
Date debt was inc	curred 06/01/2014	Last 4 digits of account number	2346			

Official Form 106D

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Debtor 1	Jeffery J. Heller			Case number (f know)		
	First Name	Middle Name	Last Name			
Debtor 2	Sylvie S. Heller					
	First Name	Middle Name	Last Name			
Add the d	oller value of your on	trice in Column A on thi	s page. Write that number her	e. \$52.104.00		
		orm, add the dollar value		re: \$53,104.00		
	number here:	orm, add the donar value	e totais iroin aii pages.	\$53,104.00		
trying to c than one c debts in P Nar US	ollect from you for a creditor for any of the art 1, do not fill out one, Number, Street, Ci Bank	debt you owe to someor debts that you listed in r submit this page.	ne else, list the creditor in Par	t that you already listed in Part 1. For examp t 1, and then list the collection agency here litors here. If you do not have additional per On which line in Part 1 did you enter the cre	. Similarly, if you have more rsons to be notified for any	
	) Box 5227 ncinnati, OH 452	01-5227		Last 4 digits of account number 5710		
	me, Number, Street, Ci fds/wds ) Box 1697	ty, State & Zip Code		On which line in Part 1 did you enter the cre	editor? <b>2.2</b>	

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		Document	Page 2	2 of 57	
Fill in this info	rmation to identify your ca	se:			
Debtor 1	Jeffery J. Heller				
	First Name	Middle Name	Last Name		į
Debtor 2	Sylvie S. Heller				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS, WES	TERN DIVISION	
Case number				ļ	
if known)					☐ Check if this is an
					amended filing
Υκ: -: - I	···· 4005/5				
	rm 106E/F		OI - '		4045
		o Have Unsecured			12/15 PRIORITY claims. List the other party to
: Creditors Who	Have Claims Secured by Prop Page to this page. If you have	perty. If more space is needed, co	py the Part yo	u need, fill it out, number the	ecured claims that are listed in Schedule e entries in the boxes on the left. Attach ditional pages, write your name and
Part 1: List	All of Your PRIORITY Unse	ecured Claims			
	itors have priority unsecured of	claims against you?			
No. Go to	Part 2.				
Yes.					
Part 2: List	All of Your NONPRIORITY	Unsecured Claims			
☐ No. You h ■ Yes.	nave nothing to report in this part	. Submit this form to the court with y	your other sche	dules.	
unsecured cl	aim, list the creditor separately for		identify what ty	ype of claim it is. Do not list cla	or has more than one nonpriority ims already included in Part 1. If more aims fill out the Continuation Page of Part
					Total claim
4.1 Ameri	ican Express	Last 4 digits of acc	ount number	1613	\$998.00
Nonprio	rity Creditor's Name				
	spondence ox 981540	When was the debt	incurred?	09/01/2015	
	so, TX 79998-1540				
	Street City State Zlp Code	As of the date you	file, the claim i	is: Check all that apply	
Who in	curred the debt? Check one.				
Deb	tor 1 only	☐ Contingent			
☐ Deb	tor 2 only	☐ Unliquidated			
☐ Deb	tor 1 and Debtor 2 only	☐ Disputed			
☐ At le	ast one of the debtors and anoth	· <del>-</del> ·	ITY unsecured	d claim:	
	ck if this claim is for a commu	•			
debt Is the c	laim subject to offset?	☐ Obligations arisin report as priority clai		ration agreement or divorce the	at you did not
■ No		<u>'</u> ' '		g plans, and other similar debts	S
☐ Yes		Other. Specify	•	• •	
⊔ res		Other. Specify	Cicuit Car	A	

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Heller, Jeffery J. & Heller, Sylvie S	5.	Case number (f know)	
Avant Credit, Inc	Last 4 digits of account number	3285	\$9,028.00
Nonpriority Creditor's Name	When was the debt incurred?	10/1/14	
640 N La Salle Dr Ste 535 Chicago, IL 60654-3731 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
Debtor 1 only	По и		
	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d alaim.	
☐ At least one of the debtors and another	Student loans	o ciaim:	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	<u> </u>	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
☐ Yes	Other. Specify	g plants, and out of similar doors	
3 Cap1/Menards	Last 4 digits of account number	1051	\$1,880.00
Nonpriority Creditor's Name	_		<b>¥ 1,000</b>
PO Box 30253 Salt Lake City, UT 84130-0253 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim	04/01/2014 is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Care	<u>d</u>	
4 Capital One	Last 4 digits of account number	6312	\$3,816.00
Nonpriority Creditor's Name Attn: Bankruptcy PO Box 30285	When was the debt incurred?	01/01/2010	
Salt Lake City, UT 84130-0285  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Πyes	Other Specify Credit Care	4	

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Heller, Jeffery J. & Heller, Sylvie S.		Case number (f know)	
Capital One	Last 4 digits of account number	7602	\$3,691.00
Nonpriority Creditor's Name Attn: Bankruptcy PO Box 30285	When was the debt incurred?	01/01/2010	
Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	,		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Citibank Sears	Last 4 digits of account number	4146	\$1,100.00
Nonpriority Creditor's Name  Citicorp Credit Srvs/Centralized	When was the debt incurred?	01/01/2015	
Bankrup	mon was the asst mountain.	01/01/2013	
PO Box 790040			
Saint Louis, MO 63179-0040  Number Street City State Zlp Code	As of the date you file, the claim	a. Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	<b>5.</b> Опеск ан так арру	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other. Specify Credit Card		
Comenity Bank/Bergners Nonpriority Creditor's Name	Last 4 digits of account number	7895	\$887.00
PO Box 182125	When was the debt incurred?	11/15/2014	
Columbus, OH 43218-2125  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
Who incurred the debt? Check one.	710 of the date you me, the stall h	o. Onook all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Credit Card	1	

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Heller, Jeffery J. & Heller, Sylvie S	<u>•</u>	Case number (f know)	
Comenity Bank/Bergners	Last 4 digits of account number	2524	\$262.00
Nonpriority Creditor's Name	When was the debt incurred?	11/10/2014	
PO Box 182125 Columbus, OH 43218-2125 Number Street City State Zlp Code	As of the date you file, the claim		
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Credit Care	d	
Comenity Bank/Lane Bryant	Last 4 digits of account number	3956	\$188.00
Nonpriority Creditor's Name	When was the debt incurred?	05/01/2014	
PO Box 182125	when was the debt incurred?	03/01/2014	
Columbus, OH 43218-2125			
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.  ☐ Debtor 1 only	_		
_	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
lebt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	Other. Specify Credit Care	d	
Comenity Bank/Torrid	Last 4 digits of account number	2440	\$71.00
Nonpriority Creditor's Name			·
PO Box 182125 Columbus, OH 43218-2125	When was the debt incurred?	11/01/2014	
Number Street City State ZIp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
□Yes	Other Specify Credit Care	d	

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Debto	Heller, Jeffery J. & Heller, Sylvie S.		Case number (f know)				
4.11	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	5982	\$4,939.00			
	Attn: Bankruptcy PO Box 3025	When was the debt incurred?	7/1/15				
	New Albany, OH 43054-3025  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Care	d				
4.12	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	8484	\$1,513.00			
	Attn: Bankruptcy PO Box 3025	When was the debt incurred?	01/01/2013				
	New Albany, OH 43054-3025  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing					
	Yes	Other. Specify Credit Care	d				
4.13	dsnb/Macys	Last 4 digits of account number	9570	\$1,068.00			
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 8053	When was the debt incurred?	06/01/2013				
	Mason, OH 45040-8053  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Care	d				

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Debto	Heller, Jeffery J. & Heller, Sylvie S.		Case number (f know)	
4.14	dsnb/Macys Nonpriority Creditor's Name	Last 4 digits of account number	9530	\$276.00
	Attn: Bankruptcy PO Box 8053	When was the debt incurred?	05/01/2015	
	Mason, OH 45040-8053  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Care	<u></u>	
4.15	Heights Finance Corp Nonpriority Creditor's Name	Last 4 digits of account number	6409	\$1,730.00
	103 E Main St Danville, KY 40422-1637	When was the debt incurred?	10/01/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Loan		
4.16	Radiology Consultants of Rockford Nonpriority Creditor's Name	Last 4 digits of account number	7686	\$7.00
		When was the debt incurred?	06/01/2014	
	1401 E State St Rockford, IL 61104-2315			
	Number Street City State ZIp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes		g p , and cuit. cilimal dobte	
	<b>□</b> 162	Other. Specify Medical		

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Springleaf Financial Services	Last 4 digits of account number	2174	\$4,291.00							
Nonpriority Creditor's Name	- Miles		• •							
4311 E Lincolnway Sterling, IL 61081-7619 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred? 6/1/15  As of the date you file, the claim is: Check all that apply									
_										
■ Debtor 1 only	☐ Contingent									
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	_ '	☐ Unliquidated								
☐ Debtor Fand Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:									
☐ Check if this claim is for a community	☐ Student loans									
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims									
No	☐ Debts to pension or profit-sharing plans, and other similar debts									
Yes	Other. Specify Installment	t Loan								
Swedish American Hospital	Last 4 digits of account number	1321	\$128.00							
Nonpriority Creditor's Name	When was the debt incurred?	10/01/2014								
1401 E State St Rockford, IL 61104-2315	when was the dest incurred:	10/01/2014								
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply								
■ Debtor 1 only	☐ Contingent									
Debtor 2 only	☐ Unliquidated									
Debtor 1 and Debtor 2 only	☐ Disputed									
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:								
☐ Check if this claim is for a community	☐ Student loans									
debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not								
No	Debts to pension or profit-sharing	ng plans, and other similar debts								
Yes	Other. Specify Medical									
Synchrony Bank	Last 4 digits of account number	2335	\$2,831.00							
Nonpriority Creditor's Name	When was the debt incurred?	8/1/13								
PO Box 103104 Roswell, GA 30076-9104		<u></u>								
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply								
Who incurred the debt? Check one.  ☐ Debtor 1 only	_									
Debtor 2 only	☐ Contingent									
■ Debtor 1 and Debtor 2 only	☐ Unliquidated									
Deptor 1 and Deptor 2 only  At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:								
At least one of the debtors and another  Check if this claim is for a community	Student loans	<del></del>								
□ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not								
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts								
□ Yes	Other. Specify Credit Card									

Case 16-81422 Doc 1 Filed 06/10/16 Entered 06/10/16 14:08:33 Desc Main Document Page 29 of 57 Debtor 1 Heller, Jeffery J. & Heller, Sylvie S. Case number (if know) Debtor 2 4.20 Last 4 digits of account number Synchrony Bank/Dicks 6114 \$242.00 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 12/01/2015 PO Box 103104 Roswell, GA 30076-9104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.21 Synchrony Bank/Walmart \$892.00 Last 4 digits of account number 9065 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 11/01/2012 PO Box 103104 Roswell, GA 30076-9104 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Credit Card Other. Specify 4.22 **Target** Last 4 digits of account number 7041 \$71.18 Nonpriority Creditor's Name C/O Financial & Retail Services When was the debt incurred? 07/01/2015 Mailstop PO Box 9475 Minneapolis, MN 55440-9475 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

☐ Debts to pension or profit-sharing plans, and other similar debts

Credit Card

■ No
□ Yes

report as priority claims

Other. Specify

Is the claim subject to offset?

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 16-81422 Doc 1 Filed 06/10/16 Entered 06/10/16 14:08:33 Desc Main Document Page 30 of 57 Debtor 1 Debtor 2 Heller, Jeffery J. & Heller, Sylvie S. Case number (if know) have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Amex ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.1 of (Check one): PO Box 297871 Part 2: Creditors with Nonpriority Unsecured Claims Fort Lauderdale, FL 33329-7871 Last 4 digits of account number 1613 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Atg Credit Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1700 W Cortland St Ste 2 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60622-1131 Last 4 digits of account number 7686 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Avant Inc** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 640 N La Salle Dr ■ Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60654-3781 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Bank USA N Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 85015 ■ Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23285-5015 Last 4 digits of account number 6312 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Capital One Bank USA N Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 85015 ■ Part 2: Creditors with Nonpriority Unsecured Claims Richmond, VA 23285-5015 Last 4 digits of account number 7602 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Cb/berg Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3100 Easton Square PI ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43219-6232 Last 4 digits of account number 2524 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Comenity Bank/Bergners** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3100 Easton Square PI Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43219-6232 Last 4 digits of account number 7895 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Comenity Bank/Lnbryant Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 182789 ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43218-2789 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Comenity Bank/Torrid Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 182685 ■ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43218-2685 Last 4 digits of account number 2440

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Discover Fin Svcs LLC

Line 4.11 of (Check one):

Part 1: Creditors with P

k one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 5982

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Discover Fin Svcs LLC

Line 4.12 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

PO Box 15316

Wilmington, DE 19850-5316

Last 4 digits of account number 8484

PO Box 15316

Wilmington, DE 19850-5316

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Debtor 1 Debtor 2 Heller, Jeffery J. & Heller, Sylvi		Case number (f know)	
Name and Address Dsnb Macys 9111 Duke Blvd	On which entry in Part 1 or Part 2 di Line 4.13 of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
Mason, OH 45040-8999	Last 4 digits of account number	9570	
Name and Address Dsnb Macys 9111 Duke Blvd Mason, OH 45040-8999	On which entry in Part 1 or Part 2 di Line <b>4.14</b> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	9530	
Name and Address FMA Alliance, LTD 12339 Cutten Rd Houston, TX 77066-1807	On which entry in Part 1 or Part 2 di Line 4.12 of ( <i>Check one</i> ):  Last 4 digits of account number	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  8484	
Name and Address Mutual Management Serv 401 E State St Rockford, IL 61104-1027	On which entry in Part 1 or Part 2 di Line 4.18 of ( <i>Check one</i> ):  Last 4 digits of account number	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  1321	
Name and Address Sears/Cbna PO Box 6282 Sioux Falls, SD 57117-6282	On which entry in Part 1 or Part 2 di Line 4.6 of (Check one):  Last 4 digits of account number	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  4146	
Name and Address Syncb/dks PO Box 965005 Orlando, FL 32896-5005	On which entry in Part 1 or Part 2 di Line <b>4.20</b> of ( <i>Check one</i> ):  Last 4 digits of account number	d you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims  6114	
Name and Address Syncb/Mega Group USA I C/o PO Box 965036 Orlando, FL 32896-5036	On which entry in Part 1 or Part 2 di Line 4.19 of ( <i>Check one</i> ):  Last 4 digits of account number	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  2335	
Name and Address Syncb/Walmart PO Box 965024 El Paso, TX 79998	On which entry in Part 1 or Part 2 di Line 4.21 of (Check one):  Last 4 digits of account number	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  9065	
Name and Address Synchrony Bank Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896-5060	On which entry in Part 1 or Part 2 di Line 4.21 of (Check one):	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number	9065	
Name and Address Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673	On which entry in Part 1 or Part 2 di Line 4.22 of (Check one):  Last 4 digits of account number	d you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  7041	
	gs or account number	/ V <del>* </del> 1	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

<sup>6.</sup> Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 Debtor 2 Heller, Jeffery J. & Heller, Sylvie S.

Case number (if know)

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.		6c.	φ	
	oc.	Claims for death or personal injury while you were intoxicated	oc.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	39,909.18
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	39,909.18

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		DOGDINE	III Paue 33 01 37	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jeffery J. Heller			
	First Name	Middle Name	Last Name	
Debtor 2	Sylvie S. Heller			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, WESTERN DIVIS	ION
Case number (if known)				

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number,	whom you have the Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<del>_</del>
2.2					
	Name				<del>_</del>
	Number	Street			<del>_</del>
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				<del>_</del>
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				<del>_</del>
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	<del>_</del>

Case 16-81422 Doc 1 Filed 06/10/16 Entered 06/10/16 14:08:33 Desc Main Document Page 34 of 57 Fill in this information to identify your case: Debtor 1 Jeffery J. Heller Middle Name Last Name First Name Debtor 2 Sylvie S. Heller Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS, WESTERN DIVISION United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106H **Schedule H: Your Codebtors** 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. ■ No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. ☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Name, Number, Street, City, State and ZIP Code

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Street

Street

State

State

3.1

3.2

Name

Number City

Name

Number

City

ZIP Code

ZIP Code

Check all schedules that apply:

☐ Schedule D, line

☐ Schedule D, line

☐ Schedule E/F, line ☐ Schedule G. line

☐ Schedule E/F, line ☐ Schedule G. line

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Fill	in this information to	identify your cas	se:				1				
	otor 1	Jeffery J. Hel									
	otor 2	•				_					
	ouse, if filing)	Sylvie S. Hell	<u>ler</u>			_					
Uni	ted States Bankrupt	cy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS, W	ESTERN	_					
	se number							ck if this is:			
(If Kr	nown)						1	An amende	Ū		-ht 40
_	((' - ' -   <b>-</b>	4001								ng postpetition owing date:	chapter 13
	fficial Form						Ī	им / DD/ Y	YYY		
S	chedule I: \	our Inco	me								12/1
spo atta	use. If you are sepa	rated and your	re married and not filing spouse is not filing with the top of any addition	h you, do not inclu	ide informa	atior	about y	our spou	se. If mo	re space is n	eded,
1.	Fill in your emplo information.	yment		Debtor 1				Debtor 2	or non-	filing spouse	
	If you have more th	•	Employment status	■ Employed				■ Empl	oyed		
	attach a separate p			☐ Not employed				☐ Not e	mployed		
	employers.	account or	Occupation	Production Su	upervisor			Mental	Health	Tech	
	Include part-time, s self-employed work		Employer's name	UPM-KYMME	NE, INC			State o	f Illinois	S	
	Occupation may in homemaker, if it ap		Employer's address	55 Shuman Bl Naperville, IL		-					
			How long employed th	nere? 6 moi	nths			_(	years		
Par	rt 2: Give Deta	ails About Mont	hly Income								
	mate monthly incor		e you file this form. If yo	ou have nothing to re	eport for any	y line	e, write \$	0 in the spa	ace. Inclu	de your non-fil	ng spouse
	u or your non-filing spee, attach a separate		than one employer, comb ı.	oine the information	for all emplo	oyers	s for that	person on	the lines	below. If you n	eed more
							For De	btor 1		ebtor 2 or iling spouse	
2.			, and commissions (before culate what the monthly was		2.	\$	4	,621.67	\$	4,079.18	-
3.	Estimate and list	monthly overtin	ne pay.		3.	+\$		0.00	+\$	298.25	_
4.	Calculate gross li	ncome. Add line	2 + line 3.		4.	\$	4,6	21.67	\$_	4,377.43	

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In here  roll deductions:  Medicare, and Social Security deductions datory contributions for retirement plans interpretations of retirement plans are repayments of retirement fund loans rance estic support obligations in dues redeductions. Specify:  yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4. er income regularly received: income from rental property and from operating a business, ession, or farm ha statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hily net income. est and dividends	4. 5a. 5b. 5c. 5d. 5e. 5f. 5g. 7.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,183.98 288.45 0.00 0.00 30.90 0.00 0.00 1,503.33 3,118.34		828.12 175.07 0.00 0.00 440.32 0.00 92.96 0.00 1,536.47 2,840.96
roll deductions:  Medicare, and Social Security deductions datory contributions for retirement plans interior contributions for retirement plans aired repayments of retirement fund loans rance estic support obligations in dues r deductions. Specify:  yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4.  er income regularly received: income from rental property and from operating a business, ession, or farm in a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hily net income. est and dividends	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+ 6. 7.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1,183.98 288.45 0.00 0.00 30.90 0.00 0.00 1,503.33	\$	828.12 175.07 0.00 0.00 440.32 0.00 92.96 0.00 1,536.47
Medicare, and Social Security deductions datory contributions for retirement plans intary contributions for retirement plans sired repayments of retirement fund loans rance estic support obligations in dues r deductions. Specify:  yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4. er income regularly received: income from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	5b. 5c. 5d. 5e. 5f. 5g. 5h.+6. 7.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	288.45 0.00 0.00 30.90 0.00 0.00 1,503.33	\$ \$ \$ + \$	175.07 0.00 0.00 440.32 0.00 92.96 0.00 1,536.47
Medicare, and Social Security deductions datory contributions for retirement plans interference of retirement plans are determined repayments of retirement fund loans are estic support obligations in dues redductions. Specify:  yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4. er income regularly received: income from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hily net income. eest and dividends	5b. 5c. 5d. 5e. 5f. 5g. 5h.+6. 7.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	288.45 0.00 0.00 30.90 0.00 0.00 1,503.33	\$ \$ \$ + \$	175.07 0.00 0.00 440.32 0.00 92.96 0.00 1,536.47
datory contributions for retirement plans intary contributions for retirement plans sired repayments of retirement fund loans rance estic support obligations in dues r deductions. Specify:  yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4.  er income regularly received: income from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	5b. 5c. 5d. 5e. 5f. 5g. 5h.+6. 7.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	288.45 0.00 0.00 30.90 0.00 0.00 1,503.33	\$ \$ \$ + \$	175.07 0.00 0.00 440.32 0.00 92.96 0.00 1,536.47
ntary contributions for retirement plans lired repayments of retirement fund loans rance estic support obligations in dues r deductions. Specify:  yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4. er income regularly received: income from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	5d. 5e. 5f. 5g. 5h.+ 6. 7.	\$ \$ \$ \$	0.00 0.00 30.90 0.00 0.00 0.00	\$ \$ + \$	0.00 0.00 440.32 0.00 92.96 0.00 1,536.47
rance estic support obligations n dues r deductions. Specify:  yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  otal monthly take-home pay. Subtract line 6 from line 4.  er income regularly received: ncome from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	5e. 5f. 5g. 5h.+ 6. 7.	\$ \$ \$ \$	0.00 30.90 0.00 0.00 0.00 1,503.33	\$ \$ \$ + \$	0.00 440.32 0.00 92.96 0.00 1,536.47
estic support obligations in dues r deductions. Specify: yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4. er income regularly received: income from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	5f. 5g. 5h.+ 6. 7.	\$ \$ \$	0.00 0.00 0.00 1,503.33	\$ \$ + \$ \$	0.00 92.96 0.00 1,536.47
n dues r deductions. Specify: yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4. er income regularly received: ncome from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	5g. 5h.+ 6. 7.	\$ - \$ - \$	0.00 0.00 1,503.33	\$ + \$ \$	92.96 0.00 1,536.47
yroll deductions. Specify: yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4. er income regularly received: ncome from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	5h.+ 6. 7.	* <u> </u>	1,503.33	+ \$	0.00 1,536.47
yroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. otal monthly take-home pay. Subtract line 6 from line 4. er income regularly received: ncome from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	6. 7. 8a.	\$	1,503.33	\$	1,536.47
otal monthly take-home pay. Subtract line 6 from line 4.  er income regularly received: ncome from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	7. 8a.	· —		· <del></del>	
er income regularly received: ncome from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends	8a.	\$	3,118.34	\$	2,840.96
ncome from rental property and from operating a business, ession, or farm h a statement for each property and business showing gross ots, ordinary and necessary business expenses, and the total hly net income. est and dividends					
est and dividends		\$	0.00	\$	0.00
	8b.	\$	0.00	\$	0.00
ly support payments that you, a non-filing spouse, or a dependent larly receive		<b>'</b> _	0.00	· —	
de alimony, spousal support, child support, maintenance, divorce ement, and property settlement.	8c.	\$	0.00	\$	0.00
nployment compensation	8d.	\$-	0.00	\$	0.00
al Security	8e.	<u>*</u> —	0.00	\$	0.00
r government assistance that you regularly receive de cash assistance and the value (if known) of any non-cash assistance ou receive, such as food stamps (benefits under the Supplemental tion Assistance Program) or housing subsidies. ify:	8f.	 \$	0.00	\$	0.00
ion or retirement income		\$	0.00	\$	0.00
r monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00
er income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00
nonthly income. Add line 7 + line 9. ries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	<b>3,118.34</b> + \$	2,84	40.96 = \$ 5,959.3
tributions from an unmarried partner, members of your household, your of sor relatives.	dependen		,		ele J. 11. +\$ <b>0.</b> 0
					\$ 12. \$ <b>5,959.3</b>
					Combined monthly income
r t 1	ries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  ner regular contributions to the expenses that you list in Schedule ributions from an unmarried partner, members of your household, your or relatives.  de any amounts already included in lines 2-10 or amounts that are not an ount in the last column of line 10 to the amount in line 11. The reserved	ries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  ner regular contributions to the expenses that you list in Schedule J.  ributions from an unmarried partner, members of your household, your dependent or relatives.  de any amounts already included in lines 2-10 or amounts that are not available to control to the last column of line 10 to the amount in line 11. The result is the mount on the Summary of Schedules and Statistical Summary of Certain Liabilities.	ries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  ner regular contributions to the expenses that you list in Schedule J. ributions from an unmarried partner, members of your household, your dependents, you or relatives.  de any amounts already included in lines 2-10 or amounts that are not available to pay expenses that you list in Schedule J. ributions from an unmarried partner, members of your household, your dependents, you or relatives.  de any amounts already included in lines 2-10 or amounts that are not available to pay expenses that you list in Schedule to pay expenses that you list in Schedule to J. The result is the combination on the Summary of Schedules and Statistical Summary of Certain Liabilities and	ries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  ner regular contributions to the expenses that you list in Schedule J. ributions from an unmarried partner, members of your household, your dependents, your roommates, and or relatives.  de any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in count in the last column of line 10 to the amount in line 11. The result is the combined monthly included in lines 2-10 or amounts in line 11.	ries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  The regular contributions to the expenses that you list in Schedule J.  Tributions from an unmarried partner, members of your household, your dependents, your roommates, and or relatives.  The any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule any amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. The amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies

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Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	Jeffery J. He	llor			Che	ck if this is:	
		Jenery J. He	ilei				An amended filing	
Deb	tor 2	Sylvie S. Hel	ller					ing postpetition chapter 13
(Spo	ouse, if filing)						expenses as of the	following date:
Unit	ed States Bank	ruptcy Court for the:		HERN DISTRICT OF ILLING	OIS,		MM / DD / YYYY	
Cas	e number							
	nown)							
Of	fficial Fo	orm 106J						
So	chedule	J: Your I	 Expen	ises				12/1
Be a info (if k	as complete a ormation. If m known). Answ	and accurate as nore space is need wer every question	possible. eded, attac on.	If two married people are ch another sheet to this fo				
Par 1.	Is this a join	ribe Your House	hold					
٠.	□ No. Go to							
		es Debtor 2 live in	n a conara	ate household?				
	_		ii a sepaia	ite nousenoiu:				
	■ N		st file Offici	al Form 106J-2,Expenses	for Separate Househ	noldof Debto	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
					-			☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	Do your ex	penses include		No			_	<b>—</b> 165
		f people other th	nan _	Yes				
	yourself an	d your depender	nts? —	1 1 0 0				
exp	imate your ex	nate Your Ongoir xpenses as of yo a date after the b	our bankru	y Expenses optcy filing date unless yo o is filed. If this is a supple	ou are using this for emental Schedule J	rm as a sup J, check the	oplement in a Chap box at the top of t	ter 13 case to report he form and fill in the
valu		ssistance and ha		government assistance if yed it on Schedule I: Your I			Your exp	enses
		•						
4.		or home owners! nd any rent for the		ses for your residence. In lot.	clude first mortgage	4.	\$	625.00
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner's,	, or renter's	sinsurance		4b.	·	30.00
	•	e maintenance, re				4c.	·	0.00
		eowner's associati				4d.	·	0.00
5.	Additional I	mortgage payme	ents for yo	ur residence, such as hom	ne equity loans	5.	\$	0.00

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Debtor 1 Debtor 2	Heller, Jeffery J. & Heller, Sylvie S.	Case number (if known)	
6. <b>Utili</b>	ties:		
6a.	Electricity, heat, natural gas	6a. \$	300.00
6b.	Water, sewer, garbage collection	6b. \$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	250.00
6d.	Other. Specify: cell phone	6d. \$	425.00
. Foo	d and housekeeping supplies	7. \$	500.00
. Chil	dcare and children's education costs	8. \$	0.00
. Clot	hing, laundry, and dry cleaning	9. \$	100.00
o. Pers	onal care products and services	10. \$	175.00
1. <b>Me</b> d	ical and dental expenses	11. \$	125.00
	sportation. Include gas, maintenance, bus or train fare. not include car payments.	12. \$	350.00
3. <b>Ente</b>	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	200.00
4. Cha	ritable contributions and religious donations	14. \$	0.00
5. <b>Insu</b> Do r	rance.  not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a. \$	0.00
15b.	Health insurance	15b. \$	0.00
	Vehicle insurance	15c. \$	215.00
15d.	Other insurance. Specify:	15d. \$	0.00
6. <b>Tax</b> e Spec	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	16. \$	0.00
	allment or lease payments:		
	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	r payments of alimony, maintenance, and support that you did not re		150.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Former payments you make to support others who do not live with you.	1061).	
Spe		φ	0.00
	er real property expenses not included in lines 4 or 5 of this form or o		
	Mortgages on other property	20a. \$	0.00
20b.	Real estate taxes	20b. \$	0.00
20c.	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e.	Homeowner's association or condominium dues	20e. \$	0.00
1. <b>Oth</b>	er: Specify: College expenses for son	21. +\$	150.00
2 Calc	ulate your monthly expenses		
	Add lines 4 through 21.	\$	3,595.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1		3,333.00
	Add line 22a and 22b. The result is your monthly expenses.	\$	3,595.00
220.	Add the ZZd and ZZD. The result is your monthly expenses.	Ψ	3,393.00
	ulate your monthly net income.		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,959.30
23b.	Copy your monthly expenses from line 22c above.	23b\$	3,595.00
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	2,364.30
For e modi	rou expect an increase or decrease in your expenses within the year a xample, do you expect to finish paying for your car loan within the year or do you exfication to the terms of your mortgage?		e or decrease because of a
	lo		
ПΥ	es Explain here:		

Fill in this infor	mation to identify your	case:							
Debtor 1	Jeffery J. Heller								
	First Name	Middle Name		Last Name		-			
Debtor 2	Sylvie S. Heller								
(Spouse if, filing)	First Name	Middle Name		Last Name		<del></del>			
United States Ba	ankruptcy Court for the:	NORTHERN DIST	RICT OF ILI	LINOIS, WE	STERN DIVISI	ON			
Case number (if known)								Check if this amended fili	
Official For	<sub>m 106Dec</sub> tion About a	an Individi	ual De	ebtor's	Sched	lules			12/15
If two married pe	eople are filing together	, both are equally re	sponsible f	or supplying	correct infor	mation.			
obtaining money	is form whenever you fil y or property by fraud in 18 U.S.C. §§ 152, 1341, 1	n connection with a	lules or ame bankruptcy	ended sched case can re	ules. Making sult in fines u	a false stat p to \$250,0	tement, con 00, or impri	cealing prope sonment for u	rty, or up to 20
Sig	ın Below								
Did you pa	ay or agree to pay some	one who is NOT an a	attorney to	help you fill	out bankrupto	y forms?			
■ No									
☐ Yes.	Name of person							etition Preparei nature (Official	
that they ar	alty of perjury, I declare re true and correct.	that I have read the	summary a	Z	Poco E	is declarat	ion and	<b></b>	
	y 6. Heller				e S. Heller	2			

Date 06-08-3016

Date 66 - 08 - 2016

Fill	in th	is informat	ion to identify your	case:			
De	otor 1		Jeffery J. Heller				
De	otor 2		Sylvie S. Heller	Middle Name	Last Name		
2010000	ouse if,		First Name	Middle Name	Last Name	<del></del>	
Un	ted S	itates Bankı	ruptcy Court for the:	NORTHERN DISTRICT OF	F ILLINOIS, WESTERN DIV	ISION	
1150000	se nu nown)	mber				I   1770	Check if this is an imended filing
		al Forr					
St	ate	ment c	f Financial A	Affairs for Individ	uals Filing for B	ankruptcy	4/1
info	rmat	ion. If mor	accurate as possib e space is needed, a every question.	le. If two married people are attach a separate sheet to thi	filing together, both are ed s form. On the top of any a	ually responsible for supply dditional pages, write your	ring correct name and case numbe
Pa	rt 1:	Give Det	ails About Your Mai	rital Status and Where You L	ived Before		
1.	Wha	at is your c	urrent marital status	s?			
		Married Not marrie	d				
2.	Dur	ing the last	3 years, have you l	ived anywhere other than wi	nere vou live now?		
			•	•	•		
		No Yes. List a	Il of the places you live	ed in the last 3 years. Do not in	clude where you live now.		
	Del	btor 1 Prio	20	Dates Debtor 1 li		dress:	Dates Debtor 2 lived there
3. stat	Witl es an	hin the last d territories	8 years, did you ev include Arizona, Cali	er live with a spouse or legal fornia, Idaho, Louisiana, Neva	l equivalent in a communit da, New Mexico, Puerto Ric	y property state or territory? o, Texas, Washington and Wi	? (Community property sconsin.)
		No					
		Yes. Make	sure you fill out Sche	dule H: Your Codebtors (Offici	ial Form 106H).		
Pa	rt 2	Explain	the Sources of Your	Income			
4.	Fill i	in the total a	emount of income you	ployment or from operating a received from all jobs and all ave income that you receive tog	businesses, including part-t	ime activities.	dar years?
		No					
		Yes. Fill in	the details.				
				Debtor 1		Debtor 2	
				Sources of Income Check all that apply.	Gross income (before deductions and exclusions)	Sources of Income Check all that apply.	Gross Income (before deductions and exclusions)
			current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$24,962.00	■ Wages, commissions, bonuses, tips	\$22,005.00
				☐ Operating a business		☐ Operating a business	

Official Form 107

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	Debtor 1 Debtor 2 Heller, Jeffery J. & Heller, Sylvie S.			Cas	Case number (if known)				
					Debtor 1		Debtor 2		
					Sources of Income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app		Gross Income (before deductions and exclusions)
			dar year: December :	31, 2015 )	■ Wages, commissions, bonuses, tips	\$49,395.00	■ Wages, comm bonuses, tips	issions,	\$47,632.00
					Operating a business		Operating a bu	usiness	
			iar year bei December :		■ Wages, commissions, bonuses, tips	\$41,780.00	■ Wages, comm bonuses, tips	issions,	\$49,625.00
					☐ Operating a business		Operating a bu	usiness	
5.	other you a	de ind publi are fili each s	come regardi c benefit pay ng a joint cas	ess of wheth ments; pens se and you ha	e during this year or the two er that income is taxable. Exam ions; rental income; interest; divave income that you received too ome from each source separatel	ples of other income are alim idends; money collected from gether, list it only once under	n lawsuits; royalties; a Debtor 1.	ocial Securi ınd gambling	ity, unemployment, and g and lottery winnings. I
					Debtor 1 Sources of income Describe below.	Gross Income from each source (before deductions and exclusions)	Debtor 2 Sources of Incor Describe below.	пе	Gross Income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for E	Bankruptcy			
6.		eithei No.	Neither De	ebtor 1 nor l	's debts primarily consumer Debtor 2 has primarily consul personal, family, or household	mer debts. Consumer debts	are defined in 11 U.S	S.C. § 101(8	) as "incurred by an
			During the	90 days befo	ore you filed for bankruptcy, did	you pay any creditor a total o	f \$6,425* or more?		
			□ <sub>Yes</sub>	List below creditor. D payments	each creditor to whom you paid to not include payments for dor to an attorney for this bankrupto tt on 4/01/19 and every 3 years	nestic support obligations, s y case.	uch as child support	and alimony	tal amount you paid that . Also, do not include
		Yes.			or both have primarily consul ore you filed for bankruptcy, did		f \$600 or more?		
			■ No.	Go to line	7.				
			□ Yes	payments	each creditor to whom you paid for domestic support obligations uptcy case.				
	Cre	ditor	's Name and	d Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	ayment for
7.	Insid whic	lers in h you	clude your re are an office	elatives; any er, director, p	r bankruptcy, did you make a general partners; relatives of an erson in control, or owner of 20° prietor. 11 U.S.C. § 101. Include	y general partners; partnersh % or more of their voting sect	ips of which you are a urities; and any manag	a general par ging agent, i	rtner; corporations of ncluding one for a
		No Yes.	List all pavm	nents to an in	sider.				
	Insi		Name and		Dates of payme	nt Total amount paid	Amount you still owe	Reason fo	r this payment

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	btor 1 btor 2 Heller, Jeffery J. & Heller, Sylvie	S.	Case	e number(if known)		
8.	Within 1 year before you filed for bankruptcy insider? Include payments on debts guaranteed or cosign		ments or transfer an	y property on acc	ount of a debt tha	t benefited an
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this   Include creditor's	
Pa	rt 4: Identify Legal Actions, Repossessions	, and Foreclosures				
9.	Within 1 year before you filed for bankruptcy List all such matters, including personal injury ca and contract disputes.	, were you a party in an ses, small claims actions	ny lawsuit, court action, divorces, collection su	on, or administrati uits, paternity action	ve proceeding? s, support or custoo	dy modifications,
	■ No					
	Yes. Fill in the details.	N-4				
	Case title Case number	Nature of the case	Court or agency		Status of the cas	i <del>0</del>
10.	Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below.		erty repossessed, for	reclosed, garnishe	d, attached, seize	d, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below.  Creditor Name and Address	Describe the Property		Date		Value of the
				Date		property
11.	Within 90 days before you filed for bankrupto accounts or refuse to make a payment becau	Explain what happene cy, did any creditor, inc use you owed a debt?		ncial institution, s	et off any amount	s from your
	Yes. Fill in the details.					
	Creditor Name and Address	Describe the action th	e creditor took	Date a taken	ction was	Amount
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or and	r, was any of your proportion	erty in the possessio	n of an assignee f	or the benefit of c	reditors, a
	■ No					
	☐ Yes					
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupto	ey, did you give any gift	s with a total value o	f more than \$600 ¡	er person?	
	Yes. Fill in the details for each gift.			2_20000		02000
	Gifts with a total value of more than \$600 pe person	or Describe the gifts	•	Dates the gif	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift or contrib		ts or contributions wi	ith a total value of	more than \$600 to	o any charity?
	Yes. Fill in the details for each gift or contrib Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		ou contributed	Dates contri		Value
Pa	rt 6: List Certain Losses					
	Elot voltain 200000					

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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	btor 1 btor 2 Heller, Jeffery J. & Heller, Syl	Ivie S. Case nu	mber (if known)	
	or gambling?			
	П			
	No This is a second			
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pend insurance claims on line 33 ofSchedule A/B: Property		Value of property lost
	Old chest freezer quit working and Debtors lost all food inside	Approximately \$200 to cover the wasted for	od September 2015	\$200.00
Par	t 7: List Certain Payments or Transfers	S		
16.	consulted about seeking bankruptcy or p	ptcy, did you or anyone else acting on your behalf preparing a bankruptcy petition? eparers, or credit counseling agencies for services requi		y to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Brian Wright & Associates, P.C. 437 West State Street Suite 101 Sycamore, IL 60178	Upfront Chapter 13 attorney fees of \$1,000 and Chapter 13 filing fee of \$310	March 2016	\$1,310.00
	Access Counseling	Credit counseling certificate	March 2016	\$14.95
17.	Within 1 year before you filed for bankru promised to help you deal with your cred Do not include any payment or transfer that you have a second or transfer	uptcy, did you or anyone else acting on your behalf ditors or to make payments to your creditors? you listed on line 16.  Description and value of any property	pay or transfer any propert  Date payment or	y to anyone who  Amount of
	Address	transferred	transfer was made	payment
18.	transferred in the ordinary course of you	made as security (such as the granting of a security into		
	Person Who Received Transfer Address	property transferred pay	cribe any property or ments received or debts	Date transfer was made
	Person's relationship to you	рак	l in exchange	
19.	Within 10 years before you filed for bank beneficiary? (These are often called asset-	kruptcy, did you transfer any property to a self-settle -protection devices.)	ed trust or similar device o	f which you are a
	Yes. Fill in the details.			
	Name of trust	Description and value of the property tran	nsferred	Date Transfer was made
			5/	

Official Form 107

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832277	tor 1 tor 2	Hallar laffant I 9 Hallar Culuia (	S		Case num	ber (if known)	
Par	t 8:	List of Certain Financial Accounts, Inst	ruments, Safe Deposit I	Boxes, and Sto	rage Units		
AND THE RESERVE OF THE PERSON NAMED IN	Witi sold	nin 1 year before you filed for bankruptcy, i, moved, or transferred? ude checking, savings, money market, or ses, pension funds, cooperatives, associa No Yes. Fill in the details.	, were any financial acc	ounts or instru	ments held		
	Na	me of Financial Institution and dress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.		you now have, or did you have within 1 ye h, or other valuables?	ear before you filed for	bankruptcy, an	y safe depo	osit box or other depo	sitory for securities,
		No					
		Yes. Fill in the details.					
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe	the contents	Do you still have it?
22.	Hav	e you stored property in a storage unit or	place other than your	home within 1	year before	you filed for bankrup	tcy?
		No Yes. Fill in the details.					
	Na	me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S and ZIP Code)		Describe	the contents	Do you still have it?
Pai	t 9:	Identify Property You Hold or Control f	or Someone Else				
23.		you hold or control any property that som neone.	neone else owns? Inclu	de any propert	y you borro	wed from, are storing	for, or hold in trust for
		No					
		Yes. Fill in the details.					
		/ner's Name dress (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Pai	t 10:	Give Details About Environmental Infor	rmation				
For	the p	ourpose of Part 10, the following definition	ns apply:				
	tox	vironmental law means any federal, state, ic substances, wastes, or material into the strolling the cleanup of these substances,	air, land, soil, surface				
	Site	means any location, facility, or property	as defined under any e	nvironmental la	aw, whether	r you now own, operat	e, or utilize it or used to
	Haz	cardous material means anything an envir terial, pollutant, contaminant, or similar te	onmental law defines a	s a hazardous	waste, haza	rdous substance, toxi	c substance, hazardous
Rep		ill notices, releases, and proceedings that		dless of when	thev occurr	red.	
24.	Has	any governmental unit notified you that	you may be liable or po	tentially liable	under or in	violation of an enviro	nmental law?
		No	s 35 58°	6.5.8			
		Yes. Fill in the details.					
	(0.95)	me of site idress (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S ZIP Code)	STA - Commence - Access		onmental law, if you It	Date of notice

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	heller, Jeffery J. & Heller, Sylvie	S	Case number (if known)	
25.	Have you notified any governmental unit of a	any release of hazardous material?		
	■ No			
	☐ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you Date of noti know it	Ce
26.	Have you been a party in any judicial or adm	inistrative proceeding under any enviro	nmental law? Include settlements and orders.	
	■ No □ Yes. Fill in the details.			
	Case Title	Court or agency	Nature of the case Status of th	
	Case Number	Name Address (Number, Street, City, State and ZIP Code)	case	в
Pa	t 11: Give Details About Your Business or C	Connections to Any Business		
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have any	of the following connections to any business?	
	$\square$ A sole proprietor or self-employed in	a trade, profession, or other activity, e	ither full-time or part-time	
	☐ A member of a limited liability compa	any (LLC) or limited liability partnership	(LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exe	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	art 12.		
	☐ Yes. Check all that apply above and fill i	in the details below for each business.		
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN	J
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed	٧.
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	ey, did you give a financial statement to	anyone about your business? Include all financial	
	■ No			
	☐ Yes. Fill in the details below.			
	Name Address	Date Issued		
	(Number, Street, City, State and ZIP Code)			
Pa	t 12: Sign Below			
true ban 18 t	and correct. I understand that making a false kruptcy case can result in fines up to \$250,000 J.S.C. §§ 152, 1341, 1519, and 3571.  Iftery J. Heller inature of Debtor 1	statement, concealing property, or obto 0, or imprisonment for up to 20 years, or Sylvie S. Heller Signature of Debtor 2	<u> </u>	are rith a
Da	te <u>06-08-2016</u>	Date <u>No-08-20</u>		
Did □ '	••	nt of Financial Affairs for Individuals Fili	ing for Bankruptcy (Official Form 107)?	
<b>=</b> :				
		tcy Petition Preparer's Notice, Declaration, ent of Financial Affairs for Individuals Filing	5 25 25 26 26 27 27 27 27 27 27 27 27 27 27 27 27 27	page 6
Offic			· · · · · · · · · · · · · · · · · · ·	Paric D

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#### United States Bankruptcy Court Northern District of Illinois, Western Division

IN RE:		Case No.	
Heller, Jeffery J. & Heller, Sylvie S.		Chapter 13	
	Debtor(s)		
	VERIFICATION OF CRE	EDITOR MATRIX	
		Number of Creditors	40
The above-named Debtor(s) her		rs is true and correct to the best of my (our) knowledg	e.
Date: <u>06-08-2016</u>	Debtor J. Lhll		*************
	Selvie SHE	Eller	
	Joint Debtor		

American Express Correspondence PO Box 981540 El Paso, TX 79998-1540

Amex PO Box 297871 Fort Lauderdale, FL 33329-7871

Atg Credit 1700 W Cortland St Ste 2 Chicago, IL 60622-1131

Avant Credit, Inc 640 N La Salle Dr Ste 535 Chicago, IL 60654-3731

Avant Inc 640 N La Salle Dr Chicago, IL 60654-3781

Cap1/Menards PO Box 30253 Salt Lake City, UT 84130-0253

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285 Capital One Bank USA N PO Box 85015 Richmond, VA 23285-5015

Cb/berg 3100 Easton Square Pl Columbus, OH 43219-6232

Citibank Sears Citicorp Credit Srvs/Centralized Bankrup PO Box 790040 Saint Louis, MO 63179-0040

Comenity Bank/Bergners PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Bergners 3100 Easton Square Pl Columbus, OH 43219-6232

Comenity Bank/Lane Bryant PO Box 182125 Columbus, OH 43218-2125

Comenity Bank/Lnbryant PO Box 182789 Columbus, OH 43218-2789 Comenity Bank/Torrid PO Box 182685 Columbus, OH 43218-2685

Comenity Bank/Torrid PO Box 182125 Columbus, OH 43218-2125

Discover Fin Svcs LLC PO Box 15316 Wilmington, DE 19850-5316

Discover Financial Attn: Bankruptcy PO Box 3025 New Albany, OH 43054-3025

Dsnb Macys 9111 Duke Blvd Mason, OH 45040-8999

dsnb/Macys Attn: Bankruptcy PO Box 8053 Mason, OH 45040-8053

FMA Alliance, LTD 12339 Cutten Rd Houston, TX 77066-1807 Heights Finance Corp 103 E Main St Danville, KY 40422-1637

Mutual Management Serv 401 E State St Rockford, IL 61104-1027

Radiology Consultants of Rockford 1401 E State St Rockford, IL 61104-2315

Sears/Cbna PO Box 6282 Sioux Falls, SD 57117-6282

Springleaf Financial Services 4311 E Lincolnway Sterling, IL 61081-7619

Swedish American Hospital 1401 E State St Rockford, IL 61104-2315

Syncb/dks PO Box 965005 Orlando, FL 32896-5005 Syncb/Mega Group USA I C/o PO Box 965036 Orlando, FL 32896-5036

Syncb/Walmart PO Box 965024 El Paso, TX 79998

Synchrony Bank
Attn: Bankruptcy Dept
PO Box 965060
Orlando, FL 32896-5060

Synchrony Bank PO Box 103104 Roswell, GA 30076-9104

Synchrony Bank/Dicks Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Synchrony Bank/Walmart Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104 Target C/O Financial & Retail Services Mailstop PO Box 9475 Minneapolis, MN 55440-9475

Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673

US Bank PO Box 5227 Cincinnati, OH 45201-5227

US Bank Attn: Bankruptcy PO Box 5229 Cincinnati, OH 45201-5229

Wells Fargo Dealer Services PO Box 3569 Rancho Cucamonga, CA 91729-3569

Wfds/wds PO Box 1697 Winterville, NC 28590-1697

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Filed 06/10/16
Document

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Desc Main

B201B (Form 201B) (12/09)

#### United States Bankruptcy Court Northern District of Illinois, Western Division

IN RE:	Case No
Heller, Jeffery J. & Heller, Sylvie S.  Debtor(s)	Chapter 13
CERTIFICATION OF NOTICE UNDER § 342(b) OF THE	
Certificate of [Non-Attorney] E	Bankruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing the debtor' notice, as required by § 342(b) of the Bankruptcy Code.	s petition, hereby certify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)  (Required by 11 U.S.C. § 110.)
X	\$200000000 \$1000000000000000000000000000
Certificate of	the Debtor
I (We), the debtor(s), affirm that I (we) have received and read the at	tached notice, as required by § 342(b) of the Bankruptcy Code.
Heller, Jeffery J. & Heller, Sylvie S. Printed Name(s) of Debtor(s)	X July Co-08-2016 Signature of Debtor Date
Case No. (if known)	Signature of Joint Debtor (if any)  Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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